TITLE: CHILD WELFARE MANUAL

SECTION 2: INTAKE

CHAPTER 2: CANHU PROTOCOL: STRUCTURED DECISION MAKING (SDM)

SCREENING PROCESS, RESPONSE PRIORITY AND TRACK

ASSIGNMENT

ATTACHMENT B: EMERGENCY INVESTIGATION CRITERIA

EFFECTIVE DATE: May 23, 2005

PAGE: 1

EMERGENCY INVESTIGATION CRITERIA

A. All reports of physical abuse occurring at the time of the report.

- B. All reports of severe physical injury where maltreatment is suspected to have occurred; immediate medical and/or social service attention is indicated and where the child is unprotected.
- C. All reports of sexual abuse where the alleged perpetrator continues to have unsupervised access to the child, there is a reported physical injury as a result of sexual abuse, the child is, at the time of the report, experiencing severe emotional trauma.
- D. Reports alleging that, at the time of the report, children under the age of eight are known to be left alone. In some instances when one child is over the age of eight, the report may be an emergency. Each situation must be evaluated carefully.
- E. Reports involving children who are, at the time of the report suffering from serious, untreated medical conditions which require immediate attention. This shall include all situations involving suspected or known instances of medical neglect of handicapped infants in hospitals and health care facilities. (These situations are referred to as "Baby Doe" cases).
- F. Reports alleging that parents/caretakers of children are, at the time of the report, or within the preceding 24 hours, behaving in a bizarre manner or acting under the influence of drugs or alcohol and that they could pose an immediate danger to the children.
- G. Reports that children have ingested or been given drugs or alcohol, at the time of the report or within the preceding 24 hours, and because of their age and other concerns may be at immediate risk.
- H. Reports alleging children are presently being threatened with a dangerous weapon by a parent/caretaker.
- I. Reports alleging bizarre punishment is, at the time of the report, being administered to a child (i.e., locking a child in closet, tying child to a bed).
- J. Reports alleging that children are suicidal and appear to be, at the time of the report, contemplating suicide.

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PAGE: 2

K. Reports alleging children have, at the time of the report, been left unsupervised, their parents whereabouts are unknown and because of their age or other concerns may be in physical danger.

- L. Reports from hospitals stating that a child, who is presently in their facility, is being released, may be in physical danger, and the hospital is unwilling to take protective custody.
- M. Self-Referrals from parents who state they are unable to cope; feel they will hurt or kill their child; request immediate removal of the child; or state they will immediately abandon their child.
- N. All reports involving exposure where, at the time of the report, a child is experiencing exposure to extreme weather conditions (i.e., heat, cold).
- O. Report of death of a child where maltreatment is suspected and siblings remain in the home.
- P. Reports alleging that there is an active methamphetamine laboratory in a home that includes a child.

MEMORANDA HISTORY: CD05-35